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AUG 17 2004

PATENT

Attorney Docket No.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

Applicant : JANIAK, Martin J.
Serial No. : 09/804,818
Filing Date : March 13, 2001
For : Real Time Tax Indicia System
Examiner : Chilcot, Richard E.
Group Art Unit : 3627
Confirmation No. : 2043
Customer No. : 022202

CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10

I hereby certify that, on the date shown below, this correspondence is being:

Mailing

☐ deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

37 CFR 1.8(a)

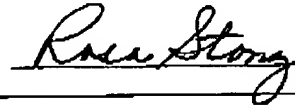
37 CFR 1.10

☐ with sufficient postage as first class mail ☐ As "Express Mail Post Office to Addressee" Mailing Label No.

Transmission

☒ transmitted by facsimile to Fax No.: 1-703-872-9306 addressed to Examiner Chilcot, Jr., at the U.S. Patent and Trademark Office.

Date: August 17, 2004



Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL1. Transmitted herewith is:

A Response to an Office Action mailed February 17, 2004.

STATUS

2. Applicant is a large entity.

MKE/963080.1

USSN 09/804,818

Transmittal

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR §1.136 apply.
- [] Applicant believes that no extension of term is required. However, if an extension of time is required, please consider this a petition therefor.
- [X] Applicant petitions for an extension of time under 37 C.F.R. §1.136 for the total number of months checked below [fees: 37 C.F.R. §1.17(a)(1)-(4)] :

Extension (months)	Fee for other than small entity	Fee for small entity
[] one month	\$ 110.00	\$ 55.00
[] two months	\$ 420.00	\$ 210.00
[X] three months	\$ 950.00	\$ 475.00
[] four months	\$ 1,480.00	\$ 740.00
		Fee: <u>\$950.00</u>

If an additional extension of time is required, please consider this a petition therefor.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Claims Remaining After Amendment		Highest No. Previously Paid For		Rate (Small Entity)	Additional Fee or	Rate (Large Entity)	Additional Fee
Total	Minus		=	x 9= \$	\$	x 18	\$ 0
Independent	Minus		=	x 43= \$	\$	x 86	\$ 0

FIRST PRESENTATION OF MULTIPLE DEP CLAIM

TOTAL
ADDIT. Fee \$

or TOTAL
ADDIT. Fee \$ 0

- c. [] No additional fee for claims is required.
- d. [] Total additional fee for claims required \$

FEE PAYMENT

5. [X] Charge Deposit Account 23-2053 in the amount of **\$950.00** for any extension and/or fee required or credit for any excess fee paid.
- [] Attached is a check in the sum of \$ _____

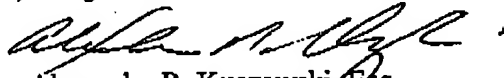
MKE/963080.1

USSN 09/804,818

Transmittal

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Account No. 23-2053.
☒ If any additional fee for claims is required, charge Account No. 23-2053.

Date: August 17, 2004
Alexander R. Kuszewski, Esq.
Reg. No. 41,920

Whyte Hirschboeck Dudek S.C.
555 East Wells Street, Suite 1900
Milwaukee, WI 53202-3819
(414) 273-2100
Customer No.

MKE/963080.1